

## TELEFAX COVER SHEET

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TO: Commissioner of Patents  
FAX NO.: 703-872-9306  
FROM: John M. Kelly, Esq.  
DATE: July 6, 2004  
MATTER: Serial No. 09/458,322 Filed: December 10, 1999  
DOCKET NO.: DIVA/198  
APPLICANT: Zack, et al

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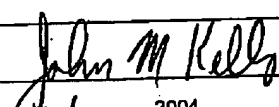
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<b>TRANSMITTAL FORM</b> (to be used for all correspondence after initial filing)	Application Number	09/458,322	
	Filing Date	December 10, 1999	
	First Named Inventor	Zack, Stephen Jeffrey	
	Group Art Unit	2611	
	Examiner Name	Huynh, Son P.	
Total Number of Pages in This Submission	13	Attorney Docket Number	533/198

ENCLOSURES (check all that apply)		
<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment / Response <input checked="" type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request – 3 mo. <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Assignment Papers (for an Application) <input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition Routing Slip (PTO/SB/69) and Accompanying Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____	<input type="checkbox"/> After Allowance Communication to Group <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): <b>Certificate of Facsimile Transmission</b>
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Firm or Individual name	John M. Kelly, Esq., Reg. No. 33,920	
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